

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000067274

Entity Name: BAJA HOLDINGS, INC.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

801 W SR 436  
STE 1083  
ALTAMONTE SPRINGS, FL 32714 US

## New Principal Place of Business:

## Current Mailing Address:

801 W SR 436  
STE 1083  
ALTAMONTE SPRINGS, FL 32714 US

## New Mailing Address:

FEI Number: 59-3397961      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CHENAIL, GREGORY C P  
801 W SR 436  
STE 1083  
ALTAMONTE SPRINGS, FL 32714 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CHENAIL, GREGORY C  
Address: 929 OASIS CT  
City-St-Zip: APOPKA, FL 32712

Title: VD ( ) Delete  
Name: DAHLEN, PRISCILLA  
Address: 37 BLUE STONE CT  
City-St-Zip: CHADDS FORD, PA 19317

Title: SD ( ) Delete  
Name: DAHLEN, JUDITH K  
Address: 622 RENAISSANCE POINTE BLVD. APT #312  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY C. CHENAIL

PD

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date